



POSTER PRESENTATION

Open Access

National survey of patients with psoriatic arthritis in Spain: disease activity, pharmacological therapy and impact on quality of life

J D Cañete^{1*}, R Rodríguez², J Ramírez¹, ARPA Study Group

From 5th European Workshop on Immune-Mediated Inflammatory Diseases
 Sitges-Barcelona, Spain. 1-3 December 2010

Objective

To evaluate disease activity, management with pharmacological therapy and the impact on functional capacity and quality of life of psoriatic arthritis in Spain.

Methods

Cross-sectional, multicenter, national survey. The following data were collected: age, sex, type of psoriasis, swollen and tender joint counts (SJ 44/TJ 46), ESR (mm/1hora), CRP (mg/dL), DAS28, Psoriasis Global Assessment (PGA), Physician Global Assessment (PhyGA), Patient Global Assessment (PatGA), pharmacological therapy taken (AINEs, glucocorticoids, DAMARDs, and anti-TNFalfa therapy), Visual Analogue Scale (VAS) of pain, Disease impact as measured by VAS in the personal, occupational and social spheres, Health Assessment Questionnaire (HAQ) and Dermatology Life Quality Index (DLQI).

Results

214 patients with psoriatic arthritis fulfilling CASPAR criteria from 54 Spanish rheumatology outpatient clinics were included. Fifty-six per cent were male and the age was (mean (95%CI)) 52 years (50.1-53.8). Patient had the following clinical activity TJC: 3.2 (2.6-3.7); SJC: 2.4 (2-2.9); ESR: 20.6 (18.4-22.8) mm/1 h; CRP: 5.3 (3.7-6.8) mg/dL; DAS28: 3.10 (2.9-3.3); PhyGA: 24.7 (21.4-27.9); PatGA: 29.2 (25.2-33.2); VAS pain: 29.7 (25.5-38.8). Twenty four percent of patients had a moderate-severe extent of PsA as measured by PGA.

Of 173 patients from whom DAS28 was available, 38% were in remission (DAS28<2.6); 23% had low activity (DAS28>2.6<3.2) and 39% had moderate or high activity (DAS28>3.2). 98.6% of patients were taken drugs for treatment of psoriatic arthritis: 21% oral glucocorticoids (<5 mg of prednisolone), 86.2% DMARDs (96% methotrexate and/or leflunomide) and 26.2% anti-TNFalfa therapies.

Disease impact measured by VAS in the personal sphere was higher in females than in males (31.2 (25-37.4) vs 22.1 (16.7-27.5); p<0.03). The global HAQ was 0.61 (0.52-0.7), being significantly higher in females (0.84 (0.71-0.97) vs 0.4 (0.31-0.54); p<0.00001). Global DLQ was 3.5 (2.8-4.2), with youngest patients (18-29 years) reporting greater involvement (18% indicated severe or very severe effects, with scores between 11 and 30)).

Conclusions

This observational national survey on psoriatic arthritis is the first study trying to reflect the treatment and state of patients with psoriatic arthritis in Spain. Globally it suggest that although most patients are treated with DMARDs and one quarter with anti-TNFalfa blockers, around 40% exhibit moderate-high joint disease activity and around 25% moderate-high skin involvement. Furthermore, although the impact of the disease on functional capacity and psoriasis-related quality of life is globally mild-moderate, the group constituted by females and people of <30 years suffers a greater impact, suggesting the need of intensify the treatment of their joint and skin involvement.

¹Arthritis Unit, Rheumatology Dept, Hospital Clinic, Barcelona, Spain
 Full list of author information is available at the end of the article

Author details

¹Arthritis Unit, Rheumatology Dept, Hospital Clinic, Barcelona, Spain. ²Medical Dep., Sanofi-Aventis, Barcelona, Spain.

Published: 25 November 2010

doi:10.1186/1479-5876-8-S1-P57

Cite this article as: Cañete *et al.*: National survey of patients with psoriatic arthritis in Spain: disease activity, pharmacological therapy and impact on quality of life. *Journal of Translational Medicine* 2010 **8**(Suppl 1):P57.

**Submit your next manuscript to BioMed Central
and take full advantage of:**

- Convenient online submission
- Thorough peer review
- No space constraints or color figure charges
- Immediate publication on acceptance
- Inclusion in PubMed, CAS, Scopus and Google Scholar
- Research which is freely available for redistribution

Submit your manuscript at
www.biomedcentral.com/submit

